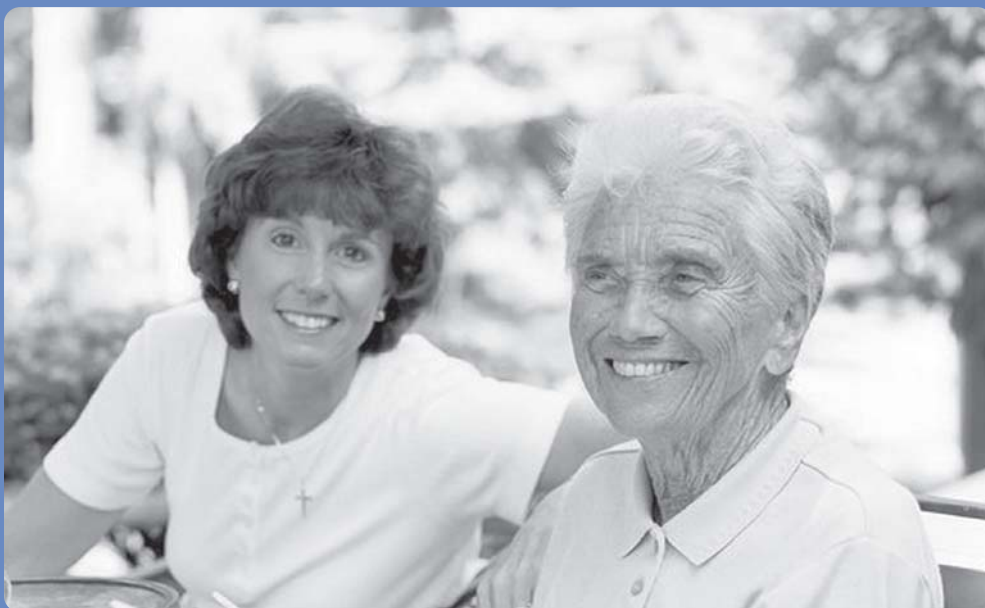


Caring for Your Aging Parents

Managing the Details



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Get Ready

No one plans to take care of a parent. We find that the time just creeps up on us and then we are in the middle of a situation that needs to be dealt with quickly. Your parent will grow older. His/her health will fail and his/her needs must be met. Staying ahead of this by planning for the future will make it easier when the time comes. Your parent will get the best possible care and both of you will be aware of the options ahead.

Start Talking!

It is never too soon to talk to your parents about the future. Things to discuss are:

- Medical care
- Housing
- Finances & legal affairs (wills, power of attorney)
- Insurance
- Death and funerals

Have discussions with your parents at a time when you will not be interrupted and when your parents are well rested and calm. Be open and clear with the facts about their medical condition. Keep focused on their concerns. Try to phrase concerns as questions so your parents can draw the conclusions and make the choices. Ask their opinion on what should be done. Listen carefully and be open minded about their ideas and solutions. Be sure to leave the conversation open and let them know that you can continue the discussion in a week or so.

Three Crucial Documents

These will provide legal written documentation of your parents' decisions:

1. A current and valid will
2. A durable power of attorney which allows a designated person to make legally binding decisions from signing checks, to making housing choices, should the parent become incapacitated.
3. Advance directives which will specify your parents' wishes concerning medical care and name someone to make decisions in their stead.

SHIBA (Senior Health Insurance Benefits Advisors) Program

Serving as Advocates for Idaho's Medicare beneficiaries since 1986.

We can help you put together the pieces of the senior health insurance puzzle! SHIBA staff and volunteer counselors will help you answer questions and resolve issues such as:

- My parent is turning 65. What does Medicare cover and what companies sell Medigap insurance in Idaho?
- Do my parents need part B?
- How do they choose a Medicare prescription drug plan?
- What is Medicare Advantage and what Medicare Advantage Plans are offered in my parents' area?
- Who sells Medicare supplement policies in Idaho and how do my parents choose a company and the plan that is right for them?
- How can I help my parents with health insurance?
- My parents have been considering long-term care insurance, but the choices are confusing.
- My parents need help understanding their Medicare statements and medical bills.

Senior Health Insurance Benefits Advisors (SHIBA), known in other states as SHIP, is part of a network of state health insurance assistance programs across the United States. In Idaho, SHIBA is funded by the Centers for Medicare and Medicaid Services (CMS), the federal agency which administers the Medicare program, and the Idaho Department of Insurance.

SHIBA is a part of the Consumer Affairs Bureau of the Idaho Department of Insurance which:

- Provides advocacy services for consumers
- Provides assistance with insurance problems or questions on life, disability, long term care, property, casualty and health insurance

We offer free and unbiased information, counseling and assistance regarding senior health insurance. We do not sell insurance, recommend policies, agents or specific companies. It is our goal to provide up-to-date and objective information to assist in making informed decisions.

We are proud of our volunteers/advocates throughout Idaho who receive ongoing training to provide individual counseling to seniors and their caregivers. In addition, SHIBA has a strong community education and outreach component. Coordinators make educational presentations on Medicare and other senior health insurance issues to a variety of community groups. We distribute information at health and senior fairs throughout the state.

For senior health insurance information, counseling, and assistance or to discuss volunteer opportunities, call toll free (1-800-247-4422).

This guide has been developed by the Idaho Department of Insurance SHIBA staff to provide you with information that will help you with the decisions that will be needed in taking care of your aging parents. One of the most important decisions will be based on their Medicare coverage and what supplemental coverage they will need.

Medicare Overview

Medicare beneficiaries receive their benefits under one or more parts of the Medicare law. There are currently four parts of the law (A, B, C, and D). Original Medicare consists of two parts - Part A and Part B. Part A covers a portion of hospital and other facility expenses and Part B covers a portion of other medical expenses such as doctors and lab work. Neither of these parts of the law pays all of the costs of the Medicare covered services. Many people choose to purchase additional insurance to cover the gaps.

Medicare Part C was established through the Balanced Budget Act of 1997. This part of the law allows Medicare beneficiaries to receive their Medicare covered services through private insurance companies that contract with Medicare and agree to follow Medicare regulations. Medicare Advantage Plans fall into this category.

Medicare Part D is the most recent change to the Medicare law. The Medicare Modernization Act (MMA) was enacted in 2003. It will be implemented over the next several years and will make a number of significant changes in Medicare and related insurance, including adding a prescription drug benefit, which is purchased through private insurance companies.

How To Notify Medicare About A Change of Address

Call the Social Security Administration (SSA) or go online to their website (www.ssa.gov) to change address information.

Telephone: 1-800-772-1213

Website: www.ssa.gov

A SSA customer service specialist will answer. He or she will ask some personal questions about your parents in order to protect their privacy and assure SSA staff that no one else is trying to change their address without permission. SSA will need the following information.

- Social Security number
- Date of birth
- Place of birth
- Parents full names

If you are a representative payee for a beneficiary and you want to change an address for the beneficiary, you will be asked the above information for both you and the beneficiary.

If you prefer to make the address change online with SSA, you will be given a permanent password to obtain access to a secured site where you will be asked the above questions. Further instructions for the online process can be found on the SSA website (www.ssa.gov).

Need a Replacement Medicare Card?

If your parents lose or damage their Medicare cards, you can obtain replacement cards from the Social Security Administration in one of the following ways:

1. Order online by visiting the Medicare Card Replacement section of the Social Security Administration's website (www.ssa.gov). A new card will be mailed within 30 days to the address SSA has on record.
2. Contact the local Social Security Office or call the toll-free number: 1-800-772-1213.



Types of Private Health Insurance

If, after considering your various options, you decide your parents need more insurance, there is a variety of private insurance policies available to help pay for medical expenses, services and supplies that Medicare covers only partially or not at all. The basic types of coverage include the following:

1. Medigap (medicare supplement) policies that pay some of the amounts that Medicare does not pay for covered services and which may pay for certain services not covered by Medicare;
2. Medicare Advantage plans such as health maintenance organizations (HMOs) from which health care services can be purchased directly for a fixed monthly premium;
3. Continuation or conversion of an employer-provided or other policy when your parents reach age 65;
4. Long-term care policies which pay cash amounts for each day of covered nursing home or at home care;
5. Hospital indemnity policies which pay cash amounts for each day of inpatient hospital services; and,
6. Specified disease policies which pay only when you need treatment for the insured disease.

Medigap Insurance

Medigap insurance is specifically designed to supplement Medicare's benefits, is regulated by federal and state law and must be clearly identified as Medicare supplement insurance. Medigap provides specific benefits that help fill the gaps in Medicare coverage. Other kinds of insurance may help you with out-of-pocket health care costs but they do not qualify as Medigap plans.

Standard Medigap Plans: To make it easier for consumers to comparison shop for Medigap insurance, nearly all states, U.S. territories and the District of Columbia limit the number of different Medigap policies that can be sold in any of those jurisdictions to no more than 12 standard Medigap plans. The plans, which are described on page 6, were developed by the National Association of Insurance Commissioners and incorporated into state and federal law.

The plans have letter designations ranging from "A" through "L". The plans cover specific expenses either not covered or not fully covered by Medicare. Insurance companies are not permitted to change the combination of benefits or the letter designations of any of the plans.

Each state must allow the sale of Plan A, and all Medigap insurers must make Plan A available if they sell any Medigap plans in a state. While not required to offer any of the other 11 plans, most insurers offer several plans to choose from, and some offer all 12. Insurers can independently decide which of the 11 optional plans they will sell as long as the plans they select have been authorized for sale in the state in which they are being sold.

Choosing a Medigap Policy

	A	B	C	D	E	F	G	H	I	J	K	L
*Hospital Coinsurance Coinsurance for days 61-90 (\$248) and days 91-150 (\$496) in hospital; Payment in full for 365 additional lifetime days.	•	•	•	•	•	•	•	•	•	•	\$228/day 61-90 \$456/day 91-150	\$228/day 61-90 \$456/day 91-150
Part B Coinsurance Coinsurance for Part B services, such as doctors' services, laboratory and x-ray services, durable medical equipment, and hospital outpatient services.	•	•	•	•	•	•	•	•	•	•	50%	75%*
First three pints of blood	•	•	•	•	•	•	•	•	•	•	50%	75%
Hospital Deductible Covers \$992 in each benefit period		•	•	•	•	•	•	•	•	•	50%*	75%
Skilled Nursing Facility (SNF) Daily Coinsurance Covers \$124 a day for days 21-100 each benefit period			•	•	•	•	•	•	•	•	50%*	75%
Part B Annual Deductible Covers \$131			•			•				•		
Part B Excess Charges Benefits 80% or 100% of Part B excess charges. (Under federal law, the excess limit is 15% more than Medicare's approved charge when provider does not take assignment; under New York State law, the excess limit is 5% for most services.)						100%	80%		100%	100%		
Emergency Care Outside the US 80% of emergency care costs during the first 60 days of each trip, after an annual deductible of \$250, up to a maximum lifetime benefit of \$50,000.			•	•	•	•	•	•	•	•		
At Home Recovery Benefit Up to \$40 each visit for custodial care after an illness, injury, or surgery, up to a maximum benefit of \$1,600 a year.				•			•		•	•		
Preventive Medical Care Up to \$120 a year for non-Medicare covered physicals, preventive tests and services.					•					•		
100% of coinsurance for Part B-covered preventive care services after the Part B deductible has been paid.	•	•	•	•	•	•	•	•	•	•	•	•
Hospice Care Coinsurance for respite care and other Part A-covered services.											50%*	75%*
**Outpatient Prescription Drugs												
*Out-of-Pocket Maximum Pays 100% of Part A and B coinsurance after annual maximum has been spent											\$4,000	\$2,000

Plans A-L are standardized by the federal government. Not all plans may be available in your area.

*Basic benefits

**Not covered under Medigap

Medicare Advantage Plans

Medicare Advantage Plans are health plan options that are part of the Medicare Program. If your parents join one of these plans, they generally get all their Medicare-covered health care through that plan. This coverage can, but does not always, include prescription drug coverage. Medicare pays a set amount of money every month to these private health plans to administer care. In some of these plans, there are extra benefits and lower co-payments than in the Original Medicare Plan.

Medicare Advantage Plans include Medicare Health Maintenance Organizations (HMOs), Medicare Preferred Provider Organizations (PPOs), Medicare Special Needs Plans and Medicare Private Fee-for-Service Plans. Not all plans are available in all areas of Idaho. Contact plans directly to find if they are available in the area your parents live, or contact your local SHIBA office for the plans that are available. Medicare Advantage plans do not accept those with end-stage renal disease (ESRD).

2007 Medicare Advantage Plans

Plan Type	Plan Name	Insurance Company	Telephone No.
SNP – Dual Eligible	Evercare Plan D.P.	United Healthcare	800-555-5757
Private Fee for Service	Humana Gold Choice Plans	Humana	800-833-2312
Private Fee for Service	Security Choice Plans	Unicare Life & Health Insurance	800-765-2585
Private Fee for Service & Preferred Provider Organization	Flexi Blue & Secure Blue	Blue Cross of Idaho	888-492-2583
Medical Savings Acct.	Save Well Plans & Security Choice	Unicare Medical Savings Accounts	800-765-2585
Health Maintenance Organization	True Blue	Blue Cross of Idaho	888-492-2583
Private Fee for Service	Aetna Medicare Open Plan	Aetna Medicare	800-445-1796
Private Fee for Service & Preferred Provider Organization	Secure Horizons Plans	United Healthcare	800-555-5757
Private Fee for Service	Freedom Plans	Advantra Freedom	800-711-1607
Preferred Provider Organization	Med Advantage	Regence Blue Shield of Idaho	888-734-3623
Private Fee for Service	Sterling Option Plans	Sterling Life Insurance Co.	888-858-8572
Private Fee for Service	Duet, Summit & Concert	WellCare	866-238-9898
Private Fee for Service	Sierra Optima Plans	Sierra Optima	800-274-6648
Managed Care	Health Sense Plans	Regence Blue Shield of Idaho	888-734-3623

For more detailed information call the plan or go to www.medicare.gov.

Some plans offer prescription drug coverage. Plan availability varies by county.

Medicare Prescription Drug Coverage

On January 1, 2006, Medicare began to offer prescription drug coverage to all people with Medicare. To get Medicare prescription drug coverage, your parents must choose and join a plan. Plans vary in what drugs they cover, as well as in premiums, co-pays and pharmacies. Your parents can choose coverage through a stand alone prescription drug plan (PDP) or Medicare Advantage Plan (MAPD). Not all Medicare Advantage plans offer drug coverage.

In order to choose the best prescription drug coverage, your parents will need information about any prescription drug coverage they may currently have as well as a list of the prescription drugs, doses and quantities they currently take.

If your parents have prescription drug coverage, you will need to find out whether it is, on average, at least as good as standard Medicare Prescription drug coverage. Their current insurance company will be able to tell you whether or not they offer drug coverage that is as good or better than Medicare coverage. If it is, then your parents are carrying "creditable coverage" and will not need to enroll in a Medicare drug plan. If your parents already carry "creditable coverage" and they decide they want the coverage offered through a Medicare plan, they should check with their current insurance to make sure joining a Medicare plan will not disrupt their current health coverage.

When can your parents join a drug plan?

- When your parents first become eligible for Medicare upon turning age 65 or generally the 25th month of disability. You can join during the period that starts three months before the month they turn age 65, and ends three months after the month they turn age 65. If they join during the three months before they turn age 65, coverage begins the first day of the month they turn age 65. If they join the month they turn age 65 or during the three months after, coverage is effective the first day of the month after the month they join.
- Each year between November 15 and December 31, your parents can enroll in a plan, switch plans or disenroll from a plan. If they join or switch during this time, coverage is effective January 1 of the following year.

What happens if my parents do not join when they first become eligible?

If your parents join when they are first eligible to enroll, they will avoid paying a penalty. In most cases, they will pay a penalty for the following reasons:

- If they do not join a plan when first eligible for Medicare, **and**
- They have a break in prescription drug coverage. This means they do not have other prescription drug coverage that is, on average, at least as good as standard Medicare prescription drug coverage and they have a break for a period of 63 consecutive days or longer.

Help paying for your parents' plan

If your parents meet certain financial criteria, they can apply for extra help. This can be done through a paper application or online at www.socialsecurity.gov. This is called the low-income/low asset or LIS subsidy, and it will pay for all or a portion of their costs. They may have to pay a part of their premium and deductible and may still have to pay co-pays, but the amount will be reduced. This subsidy is based on your parents' monthly income and assets. Call Social Security (1-800-772-1213) or SHIBA (1-800-247-4422) to get the paper application or to get help with the online application.

Ways to qualify for extra help

Your parents automatically qualify for extra help and do not need to apply:

- If they have Medicare and full coverage from a state Medicaid program that currently pays for prescriptions. They can switch plans at any time.
- If they get help from Medicaid paying their Medicare premiums (Medicare Savings Program). They can switch plans at any time.

Even if your parents have prescription drug coverage now, including through an employer or union, the Indian Health Service, or the Department of Veteran's Affairs, they should still apply for extra help. Check their current coverage to see how Medicare drug coverage with extra help will work with their current coverage.

How to find the best plan

In order to find the best stand-alone drug plan, please consult the Medicare web tool located at www.medicare.gov. This can be done several different ways:

- Call the local SHIBA office at 1-800-247-4422. They will connect you and your parents with an enrollment site and counselor that will offer one-on-one counseling and use your parents' list of drugs to find the best plan.
- Call 1-800-Medicare (1-800-633-4227) and give them your parents' list of drugs over the phone. They will then mail you or your parents a list of the top three cheapest plans to review and choose from. They can also enroll your parents over the phone.
- Use the internet tool found at www.medicare.gov yourself or with a family member. You will need a list of your parents' medications, the dosage of each medication and their thirty-day supply.



Idaho 2007 Medicare Part D Stand-Alone Prescription Drug Plans

Data as of September 12, 2006

Company Name	Plan Name (and ID Numbers)	Benefit Type	\$0 Premium with Full Low-Income Subsidy?	Offers Variable Copayments	Monthly Drug Premium	Annual Drug Deductible	Type of Extra Coverage Offered in the Gap
Aetna Medicare 800-213-4599	Aetna Medicare Rx Essentials (S5810-066)	Basic	•	•	\$28.10	\$190	
	Aetna Medicare Rx Plus (S5810-167)	Enhanced		•	\$42.50	\$0	
	Aetna Medicare Rx Premier (S5810-201)	Enhanced		•	\$71.80	\$0	Generics
CIGNA HealthCare 800-735-1459	CIGNATURE Rx Value Plan (S5617-153)	Basic	•	•	\$31.30	\$265	
	CIGNATURE Rx Plus Plan (S5617-155)	Enhanced		•	\$40.80	\$0	
	CIGNATURE Rx Complete Plan (S5617-201)	Enhanced		•	\$53.00	\$0	Generics
Coventry AdvantraRx 800-882-3822	AdvantraRx Value (S5674-050)	Enhanced		•	\$26.10	\$0	
	AdvantraRx Premier (S5674-051)	Basic		•	\$37.70	\$0	
	AdvantraRx Premier Plus (S5674-053)	Enhanced		•	\$50.00	\$0	Generics & Preferred Brands
	Educators Rx Basic (S5877-004)	Basic		•	\$32.10	\$265	
Educators Mutual Insurance Association 800-662-5851	Educators Rx Advantage (S5877-007)	Enhanced			\$45.40	\$50	
	Educators Rx Complete (S5877-008)	Enhanced			\$56.40	\$0	Generics
	EnvisionRxPlus Standard (S7694-031)	Basic			\$47.00	\$265	
EnvisionRx Plus 866-250-2005	EnvisionRxPlus Gold (S7694-065)	Enhanced		•	\$75.50	\$0	Generics
First Health Part D	First Health Select (S5768-078)	Basic		•	\$38.90	\$0	
Health Net 800-903-0944	Health Net Orange Option 1 (S5678-064)	Basic	•	•	\$25.40	\$265	
	Health Net Orange Option 2 (S5678-063)	Basic	•	•	\$27.90	\$0	
	Health Net Orange Option 3 (S5678-101)	Enhanced		•	\$43.10	\$0	Generics
HealthSpring Prescription Drug Plan	HealthSpring Prescription Drug Plan-Reg 31 (S5932-030)	Basic	•		\$26.20	\$265	
Humana Insurance Company 800-281-6918	Humana PDP Standard S5884-089 (S5884-089)	Basic	•		\$13.30	\$265	
	Humana PDP Enhanced S5884-029 (S5884-029)	Enhanced		•	\$19.10	\$0	
	Humana PDP Complete S5884-059 (S5884-059)	Enhanced		•	\$73.20	\$0	Generics
Medco YOURx PLAN 800-758-3605	Medco YOURx PLAN (S5660-031)	Basic		•	\$37.10	\$100	
MEMBERHEALTH 866-684-5353	Community Care Rx BASIC (S5803-100)	Basic	•	•	\$28.80	\$265	
	Community Care Rx CHOICE (S5803-168)	Enhanced		•	\$37.00	\$0	
	Community Care Rx GOLD (S5803-248)	Enhanced		•	\$45.80	\$0	Generics
NMHC Group Solutions	NMHC Medicare PDP Gold (S8841-031)	Basic		•	\$32.40	\$0	

Pennsylvania Life Insurance Company 800-845-2551	Prescription Pathway Gold Plan Reg 31 (S5597-063)	Enhanced		•	\$24.50	\$0	
	Prescription Pathway Bronze Plan Reg 31 (S5597-096)	Basic	•		\$26.40	\$265	
	Prescription Pathway Platinum Plan Reg 31 (S5597-228)	Enhanced		•	\$45.70	\$0	Generics
Regence Life and Health 800-452-2909	Regence Medicare Script (S5916-001)	Basic		•	\$37.90	\$265	
	Regence Medicare Script Enhanced (S5916-002)	Enhanced		•	\$48.10	\$0	Generics
	Advantage Star Plan by RxAmerica (S5644-087)	Basic	•	•	\$30.70	\$265	
RxAmerica 877-279-0370	Advantage Freedom Plan by RxAmerica (S5644-063)	Basic		•	\$35.60	\$265	
SAMAScript SierraRx 866-789-0565	SAMAScript (S7950-031)	Basic			\$49.40	\$265	
	SierraRx (S5917-007)	Basic	•	•	\$28.80	\$265	
	SierraRx Basic (S5917-032)	Basic	•		\$31.40	\$265	
	SierraRx Plus (S5917-057)	Enhanced		•	\$73.50	\$0	All Formulary Drugs
SilverScript 866-552-6106	SilverScript (S5601-062)	Basic	•	•	\$29.10	\$265	
	SilverScript Plus (S5601-063)	Enhanced		•	\$38.60	\$0	
	SilverScript Complete (S5601-102)	Enhanced		•	\$44.80	\$0	Generics
Sterling Prescription Drug Plan 888-858-8572	Sterling Rx (S4802-021)	Basic		•	\$40.70	\$100	
	Sterling Rx Plus (S4802-064)	Enhanced		•	\$69.00	\$100	Generics
	MedicareRx Rewards Value (S5960-031)	Basic	•	•	\$26.20	\$265	
Unicare 866-892-5335	MedicareRx Rewards Plus (S5960-067)	Enhanced		•	\$32.90	\$0	
	MedicareRx Rewards Premier (S5960-101)	Enhanced		•	\$47.40	\$0	Generics
	UA Medicare Part D Rx Covg - Silver Plan (S5755-069)	Basic			\$34.80	\$265	
United American Insurance Company 866-524-4169	UA Medicare Part D Prescription Drug Cov (S5755-034)	Enhanced		•	\$44.60	\$0	
	AARP MedicareRx Plan - Saver (S5921-031)	Basic	•	•	\$22.10	\$265	
	AARP MedicareRx Plan (S5820-030)	Basic	•	•	\$29.30	\$0	
UnitedHealthcare 888-867-5575	UnitedHealth Rx Basic (S5921-032)	Basic	•	•	\$31.10	\$0	
	UnitedHealth Rx Extended (S5820-134)	Enhanced		•	\$43.70	\$0	
	AARP MedicareRx Plan - Enhanced (S5921-033)	Enhanced		•	\$48.30	\$0	Generics
WellCare 888-423-5252	WellCare Classic (S5967-168)	Basic	•	•	\$24.00	\$265	
	WellCare Signature (S5967-065)	Basic	•	•	\$30.00	\$0	
	WellCare Complete (S5967-100)	Enhanced		•	\$45.60	\$0	Generics

Go to www.medicare.gov for more detailed information on plans.

Medicare Savings Programs

The State of Idaho has Medicare savings programs based on income and assets that may help your parents. [Qualified Medicare Beneficiary \(QMB\) Coverage](#) can pay for:

- Medicare premiums (Part A Hospital Insurance and Part B Medical Insurance);
- Medicare co-insurance; and
- Medicare deductibles.

To qualify, your parents must be:

- Entitled to enroll in Part A Medicare coverage;
- Idaho residents; and
- U.S. citizens or legal non-citizens.

In addition, 2006 monthly income must be near or below \$850.83 for an individual or \$1,140.83 for a couple. Eligibility is also dependant on assets.

What if your parents have too much income to qualify?

Then your parents may be eligible for [Specified Low-Income Medicare Beneficiary \(SLMB\)](#) benefits. Medicaid pays the Medicare Part B medical insurance premium.

To qualify, your parents must be:

- Entitled to enroll in Part A Medicare hospital insurance coverage (Medicaid will not pay the Part A premium);
- Idaho residents; and
- U.S. citizens or legal non-citizens.

In addition, 2006 monthly income must be near or below \$1,021.00 for an individual, and near or below \$1,369.00 for a couple. Eligibility is also dependant on assets.

For [SLMB2](#) (*Medicaid pays the Medicare Part B medical insurance premium*), 2006 monthly income must be near or below \$1,148.63 for an individual, and near or below \$1,540.13 for a couple. The SLMB2 program is available as long as funding has not run out.

If your parents' income is higher than this, they still may be eligible because some income does not count. Eligibility is also dependant on assets. Their assets must not be worth more than \$4,000 for an individual and \$6,000 for a couple. Assets include items such as cash, stocks, CDs, etc., but not a house. One car is exempt if the equity in the car is \$5,000 or less. Some money can be set aside for burial expenses.

Where can your parents apply for Medicare Savings Programs?

Contact the nearest Idaho Department of Health and Welfare office.

Addressing Long-Term Care Needs

Now that you have evaluated your parent's situation, you should have a pretty good sense of the type and amount of help your parent needs. Congratulations, you have taken a big first step!

Your next order of business is to address your parents' long-term care needs. The most important thing to recognize about long-term care is that you have a great number of options. Search until you find the type of arrangement that meets your parents' needs.

While an array of choices can be enormously helpful, it can also be a little overwhelming. This section will help you navigate through the maze of long-term care options. It will give you choices, help you match your needs with the most appropriate services, tell you how to arrange services and explain how to recognize when more services are needed.

Finding Services for a Parent Remaining at Home

If your parent is going to remain at home, he or she will probably need some help. You can provide help by hiring a professional service, mixing and matching professional and volunteer services, or hiring an in-home caregiver.

Matching Your Parent's Needs with the Most Appropriate Services

Review the following chart to identify ideal care options for your parent.

My Need is For		What Service or Agency Could Help at Home?
Health Care	Skilled Nursing Care	Home health
	Monitoring Conditions	Home health
	Physical Therapy	Home health
	Occupational Therapy	Home health
	Speech Therapy	Home health
	Respiratory Therapy	Home health
	Medical Equipment	Home health
Personal Care	Bathing	Home health or adult day care center
	Dressing and grooming	Home health or adult day care center
	Toilet Help	Home health or adult day care center
	Eating	Home health or adult day care center
	Transferring	Home health or adult day care center

Money Management	Banking	Few services are able to assume these tasks. Check the trust department at your parent's bank or turn the responsibilities over to a family member.
	Bill Paying	
Food & Nutrition	Shopping	Home health or volunteers
	Meal Preparation	Home health or volunteers
Household Chores	House Cleaning	Home health or volunteers
	Laundry	Home health or volunteers
	Meals	Home-delivered meals or congregate meal sites, home health, senior centers
	Shopping	Home health, volunteers from church/synagogue, community organizations
	Yard work	Home health, volunteers from church/synagogue, community organizations
	Home Maintenance	Home health, volunteers from church/synagogue, community organizations
Socialization	Support Groups	Adult day care center, senior center, community organizations, associations, hospitals, HMOs
	Counseling	Adult day care center, senior center, community organizations, associations, hospitals, HMOs
	Outings	Adult day care center, senior center, volunteers
	Activities	Adult day care center, senior center, volunteers
	Companionship	Home health volunteers from church/synagogue, community organizations
Safety	Home Modification	Senior center, home health, community organizations
	Home Repair	Home health volunteers from church/synagogue, community organizations
Transportation	General	Private carriers, special access public transportation, home health, volunteers

Home Health Care

If your parent is confined to home and requires skilled care for an injury or illness, Medicare can pay for care provided in the home by a home health agency. A prior stay in the hospital is not required to qualify for home health care, and your parent does not have to pay a deductible for home health services.

Medicare Part A or Part B pays the entire bill for covered services for as long as your parent meets certain conditions under Medicare. Coverage is provided for the services of skilled nurses, home health aides, medical social workers and different kinds of therapists. The services may be provided either on a part-time or intermittent basis, not full-time.

Besides paying for health care services, the home health benefit also covers the full cost of some medical supplies and 80 percent of the approved amount for durable medical equipment, such as wheelchairs, hospital beds, oxygen supplies and walkers.

Qualifying for Home Health Care: Medicare pays for home health care when these four conditions are met:

1. Your parent requires intermittent skilled nursing care, physical therapy, or speech therapy.
2. Your parent is confined to home, except for brief outings such as a doctor's appointment.
3. Your parent's doctor determined that your parent needs home health care and sets up a plan for your parent to receive care at home.
4. The home health agency providing the care participates in Medicare.

You can find a Medicare approved home health agency by asking your parent's doctor, hospital discharge planner, or by looking in the Yellow Pages under "home health care."

Hospice Care

Another benefit available under Part A is hospice care if your parent is terminally ill. He or she can elect to receive hospice care rather than regular Medicare benefits for the management of his or her illness.

Hospice care may be provided by either a private organization or a public agency for up to 210 days, or even longer in some cases. Emphasis is on providing comfort and relief from pain. While the Medicare hospice benefit primarily provides for care at home, it can help pay for inpatient care as well as for a variety of services not usually covered by Medicare, including homemaker services, counseling and certain prescription drugs.

Medicare pays nearly the entire bill for hospice care. There can be a copayment of up to \$5 for each drug prescription and about \$5 per day for inpatient respite care. Respite care is intended to give temporary relief to the person or persons who regularly assist with home care.

Qualifying for Hospice Care: Medicare pays for hospice care when these three conditions are met:

1. Your parent's doctor certifies that he or she is terminally ill.
2. Your parent chooses to receive hospice care instead of the standard Medicare benefits for the illness.
3. The care is provided by a Medicare participating hospice program.

If your parent elects hospice care and later requires treatment for a condition other than the terminal illness, he or she can use Medicare's standard benefits. When standard benefits are used, your parent must pay any required deductibles and coinsurance.

Comparing Home Health Agency Services with Similar Services

Locating appropriate health care support will probably be at the top of your agenda. If you are considering hiring a home health agency, but are curious about programs with similar services, review at the chart below:

Community-Based Service	Typical Services	Pros & Cons
Home Health or Home Care Agency	<ul style="list-style-type: none"> • Health & medical care • Rehabilitation & therapies • Personal care • Homemaking • Home chore services • Home-delivered meals • Companion programs • Medication set-up • Care management • Roommate matching • Transportation • Congregate meal sites • Volunteer • In-home hospice 	<p>Pros:</p> <ul style="list-style-type: none"> • Licensed • Full range of staff • Trained & licensed staff • Backups for a "no show" • Workers are supervised • Personnel responsibilities lie with the agency • Cost may be Medicare approved • Grievance and complaint procedures <p>Cons:</p> <ul style="list-style-type: none"> • Costs are higher • Scheduling may be dictated by the agency • Staff roles are defined; one staff may not be able to complete all tasks • Worker preference lies with the agency, not the consumer
Adult Day Care Center	<ul style="list-style-type: none"> • Full or half-day programs • Socialization, activities, programs, outings • Personal care provided, including bathing • Medication administration • Meals • Primary caregiver respite 	<p>Pros:</p> <ul style="list-style-type: none"> • Licensed • Full range of staff including RNs • Trained staff • Personnel issues rests with the center <p>Cons:</p> <ul style="list-style-type: none"> • Limited hours • May even be limited days • Not covered by Medicare • Costs • Parent may not feel comfortable with the setting or other participants • Transportation may be limited • Limited availability

Other Community Services	<ul style="list-style-type: none"> • Many of the services offered by home health agencies are also available through city or county aging services • Home-delivered meals • Congregate meal sites • Senior citizen centers • Care management • Personal emergency response • Transportation 	<p>Pros:</p> <ul style="list-style-type: none"> • Usually less expensive • Relies on volunteers (also a con) <p>Cons:</p> <ul style="list-style-type: none"> • Not always licensed agency or staff • Relies on volunteers (also a pro) • May be considered “welfare” • Services not uniformly available in all cities • May take more coordination to arrange all of these services
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Paying for Long-Term Care Services

As you may know, long-term care is very expensive. If you believe that Medicare will cover all necessary medical services, think again. Medicare has premiums, deductions and only limited coverage for most long-term care services.

Financing Option	Description	For More information
Medicare	<p>General: Federal program for persons 65 & older & certain persons with disabilities.</p> <p>Part A Coverage: Hospital, nursing home, hospice, some home health care and blood.</p> <p>Part B Coverage: Physicians, outpatient hospital, home care services, durable medical equipment and some services not covered by Part A.</p> <p>Part A Cost: Usually none, with deductible per benefit period</p> <p>Part B Cost: \$93.50/month with deductible and co-payment changing annually.</p>	Your local Social Security office to apply. 1-800-Medicare for questions.
Medicare Savings Programs	Medicare Savings Programs are programs that provide financial assistance to people who have difficulty paying Medicare premiums and costs. Each program has an income and asset maximum.	Your local Health and Welfare office
Medicaid	A combined federal and state program that serves people with very limited financial resources. Income and asset evaluations are required. Persons on Supplemental Security Income (SSI) or Aid to Dependent Children (AFDC) qualify. It offers complete coverage for health, personal, supportive care, and medications.	Your local Health and Welfare office

Medicare HMO Medicare PPO Medicare Private Fee- for-Service Medicare Specialty Plans	An alternative to traditional Medicare. They may offer more coverage than Medicare, but are not available in all areas.	A local agent of a licensed insurance company.
Private Coverage, Medigap Insurance	Coverage that extends to include Medicare deductibles and co-payments, filling in the coverage gaps in Medicare.	A local agent of a licensed insurance company.
Private Coverage, Long-Term Care Insurance	Insurance policy that covers the cost of nursing homes, as well as assisted living and home health care. Policies vary in coverage (e.g., number of days, cost per day, and elimination period).	Insurance company licensed in the state.
Community-based programs	Services provided by senior centers and other local programs. Eligibility and availability vary.	Your discharge planner or local area Agency on Aging office.

To find out what you can expect to pay for long-term care services, determine what financial resources your parent has available. This is more complicated than simply finding out the balance of your parent's bank account. You must dig into savings and retirement accounts, insurance policies and Medicare policies. You must ascertain the totality of your parent's personal worth.

Caregiver Strategies

In addition to the insurance information covered on the previous pages, the following information is a general outline of some of the challenges you may be faced with in caring for your aging parents:

1. Caregiver Advice

- a. Encourage social contact for your parents. Get them involved with volunteerism where they will be encouraged to stay involved.
- b. If your parents live out of town, establish a network of telephone contacts in their community: friends, social service agencies, health care providers. Stop to visit them as often as possible. Keep on top of things.
- c. Tend to your own emotional needs. Reduce your stress by setting limits on just how much you can give. Accept help. Look for organizations and other professionals to help you. There are support groups where you can share your experiences and receive help. Remember, facing mortality can be hard, but if you seize the opportunity, it can also set you free to explore areas you have never discussed with your parents before.

Warning Signs of Stress and Depression

- Difficulty falling asleep or remaining asleep
- Waking up early feeling anxious and irritable
- Marked changes in appetite, significant weight loss or gain
- Increased use of sleeping pills, alcohol or caffeine
- Uncharacteristic short temperedness, crying or agitation
- Delay or neglect of physical needs
- Decreased resistance to illness
- Difficulties with concentration or attention
- Loss of energy, fatigue
- Subdued mood, expressionless face or flat tone of voice
- Rough handling or other signs of impatience in giving care
- Recurrent thoughts of death or suicide

- d. Reduce stress. Set limits on the care you can provide. Do not allow guilt to force you to do too much. Accept help from other family members, friends, neighbors, volunteers and social service organizations.
- e. Long distance care. Providing care to parents who live far away presents other difficulties that can stress the caregivers' relationships with parents, siblings and family members. Out of town children visiting aging parents may be shocked to see signs of rapid deterioration that have gone unreported by the parents or nearby siblings. The children may direct feelings of helplessness and rage at siblings, accusing them of failing to monitor parents' health. These feelings may, in fact, be guilt feelings for not "being there" to care for aging parents.

Your primary resource in caring for elderly parents at a distance is the telephone. Establish a network of telephone contacts in the parents' community that connect you with friends, social service agencies, health care providers and other support services.

- f. **Role Reversal.** Another difficult emotional issue raised for children with aging parents is the idea of becoming parent to your parents. This role reversal can dredge up maladaptive behavior patterns from childhood, cause resentment and wreak emotional havoc with other family members unaware of the dynamics between you and your parents.
- g. **Facing mortality.** Caring for aging parents can also bring you face to face not only with your parents' mortality, but with your own. Explore with your parents the lives they have led. Try compiling an oral history. This period of life may provide an invaluable opportunity to get to know your parents in a deeper and more meaningful way and your heritage may provide valuable insight into your own life.
- h. **Support groups.** As the population ages, greater numbers of adult children affected by the concerns of caring for their elderly parents will seek support from outside the family. The need to air and share the burdens of caregiving and to gain a different perspective to cope effectively brings many adult children to social service agencies, volunteer organizations and other support groups searching for help.



2. Independent Living

- a. Your parents usually want to live in their own homes, so research all available organizations or local services that may provide in-home help, such as homemaker services, home health aids, in home alert, meals on wheels, public transportation, volunteer escorts, van service, etc. This could help reduce depression, theirs and yours.
- b. Do not overlook your parents' safety at home. Put railings where they are needed, non-skid mats, raised toilets and add grab bars. Add a bath bench. These modifications and more will help your parents stay at home longer.

Not Just Independent - Involved

In their book, *Taking Care*, Nancy Hooyman and Wendy Lustbader recommend these strategies to keep the independent elderly mentally vigorous and interested in life:

- **Institute a weekly outing for the stimulation, anticipation and change of scenery.** Gear the event to your parents' ability. A ride in the country, shopping at the mall or touring a museum will break up the monotony of remaining in a known environment.
- **Devise contributions to the household, the family or the community that satisfy your parents' need for purposeful activity.** What do your parents have to offer? Give them opportunities to share their experience, skills and knowledge to help them feel productive and vital.
- **Establish regularly occurring pleasures.** Find out what your parents find enjoyable and arrange for them to experience that enjoyment on a predictable schedule. Everyone needs something to look forward to.

3. If a Parent Moves in with You:

- a. First, look at these factors before your parent moves in with you:

Factors to Consider Before Your Parents Move In

- **Expense.** Will a family member have to give up employment or reduce working hours to provide care?
- **Confinement.** Will caregivers have to restrict out of home activities? Are temporary alternative caregivers available?
- **Accessibility.** Is the family's home free of obstacles such as stairs that would impede a disabled parent?
- **Space.** Will someone be displaced to accommodate the aging parent? Are bathroom facilities sufficient? Will all family members have enough personal space?
- **Privacy.** Will increased access negatively impact relationships between parent, adult child and grandchildren?
- **Noise.** Can noise levels be controlled throughout the house?
- **In-law relationships.** Does the son- or daughter-in-law concur with the decision to move the parent in? Is there friction that could make either your spouse or parent uncomfortable?
- **Lifestyle compatibility.** What aspects of the older person's lifestyle could create conflict?
- **Future plans.** How long do you expect this arrangement to last? Will it impair your freedom to realize personal goals such as retirement, travel or education? How will the decision be made to change the arrangement?

- b. When a parent moves in, remember you will have to adjust your way of living to accommodate theirs.

If Your Parent Lives With You...

The American Association of Retired Persons' Hand in Hand Program advises adult children to follow certain rules to make living with an aging parent easier:

- Maintain a routine.
- Have an acknowledged head of the house.
- Have husband and wife stick together in dealing with both the children and elderly parent.
- Have regular jobs for the elderly within their limits. Clarify the division of labor.
- Encourage the older person to make as many decisions as possible. Recognize his or her areas of expertise and consult the older person accordingly.
- Have children treat the older person with kindness and respect. See that all persons have regular periods of rest and relaxation. Encourage happiness and laughter.
- See that all members of the family express their appreciation of an elderly parent.
- Seek help before an emergency arises.
- Be alert to the development of new resources that make things more convenient or that can compensate for particular problem areas.
- Provide adequate living quarters and privacy for everyone.
- Keep lines of communication open. Treat parents' beliefs and opinions with respect. Keep other family members informed.
- Encourage the continuance of the parent's life style. Do not take away anything that does not need to be taken away.
- Allow for an adjustment period.

Taking care of a parent at home can be very different, so plan your respite and care options. Your physical and mental health may be at stake.

- c. Before your parents move in with you, look at alternative living arrangements: senior communities, planned retirement communities, resort communities, board and care homes, shared housing, foster care, continuing care facilities, and, as the last resort, nursing homes.

4. Health Care

- a. Find out what your parents have as far as health care: Medicare, Medigap, Medicare Advantage, long-term care insurance policy and/or Medicaid.
- b. Explain different health care options. You need to know your parents' financial conditions so you can help them to make common sense decisions.

Remember your parents may have a desire to pass part of their estate on. You need to try to protect these views if they have not followed through with their desires.

There are many ways of protecting their estate such as having your parents gift it, private annuities, trusts and life insurance. These are just a few of the ways to protect an estate.

Also, encourage your parents to have a legal will, and decide who will be the administrator.

Try to get an [advance directive](#) such as a general durable power of attorney for health care or a living will (or both of them) between your parents to be prepared in case one or the other becomes incapacitated. This will ease your mind.

5. Planning for Death

This is something that, even though it is unwanted and painful, is inevitable. Help prepare for the funeral. Preplanning allows the mortuary to do the work when you are emotionally incapable.

6. Coping With the Death of a Parent

When a parent dies, you may be overwhelmed not only by the grief associated with your loss, but with decisions that must be made quickly in order to arrange funeral services, satisfy legal requirements and inform agencies and insurers of the death in order to collect benefits and entitlements. Here is a short checklist of items to consider before the need arises so you will be prepared to effectively manage the tasks associated with death when you are faced with them.

- *When death occurs.* Within several hours after death, you will be faced with many decisions. You will need to choose a funeral home and arrange for delivery of the body. You may need to sign papers authorizing autopsy, organ donation and embalming. Request signed copies of the death certificate to present to insurance companies, banks and other institutions. And you should begin collecting important documents such as the will, insurance policies and other financial papers.
- *Funeral arrangements.* Because most funeral arrangements are made by grieving family members whose judgment may be affected by their emotional state, strict federal regulations dictate how funeral homes must communicate the costs associated with burial to family members. The law says you cannot be forced to purchase a “funeral package.” All items such as flowers, music, markers and caskets, should be available for separate purchase. All costs must be disclosed in writing, and an itemized statement including individual costs per item must be presented. You should not be charged for unauthorized embalming, and you have the right to refuse embalming if the deceased will be cremated or buried immediately.

- *Informing others of the death.* In addition to family and friends, there are many organizations you will need to inform of the death. Call your local Social Security office to cancel monthly payments and apply for death benefits. Notify insurance companies and request forms to claim benefits. Inform creditors and make plans to satisfy outstanding debts. In general, any organizations from whom a parent receives regular mail will need to be informed of the death.
- *Protecting yourself.* During the period immediately following a parent's death, you will be extremely vulnerable and over stressed. Be aware of how you are coping with the tasks associated with death and take time for yourself. Do not let the responsibilities of settling your parents' affairs prevent you from expressing your grief or accepting help from friends and family members. Especially if you have been caring for an aged parent for a long time, you will feel pressed to keep busy. While this can help you to perform the many tasks necessary following a death, it can also leave you feeling even more empty once those tasks are complete. Be sure to allow yourself to experience your grief and to share your feelings with others.

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12 Tips to Protect You and Your Parents from Health Care Fraud

Review this list with your parents:

1. Only visit your personal doctor, hospital or clinic for medical help. No one else should make referrals for special equipment, services or medicine.
2. Never show anyone your medical or prescription records without first talking to your doctor or pharmacist.
3. If someone calls and tries to threaten or pressure you into something – simply hang up the phone.
4. If someone comes to your door and says they are from Medicare or some other health care company shut the door. It is shrewd to be rude!
5. Do your homework and talk to your health care provider before buying or investing in internet “cure-all” or “miracle” products or services.
6. Do not keep mail in your mailbox for more than one day. People steal personal information right out of your mailbox.
7. Rip up or shred your Medicare or other health care papers and other important documents before throwing them away. Crooks go through the trash!
8. Treat your Medicare & Social Security numbers like credit cards. If someone offers to buy your Medicare or social security number, do not do it. It is simply not worth it.
9. Remember that Medicare does not sell anything.
10. Follow your instincts - if it seems too good to be true, it usually is!
11. If you suspect an error, fraud or abuse related to health care, gather the facts and report it.
12. ALWAYS read your Medicare Summary Notice (MSN) or health care billing statement. Your Medicare Summary Notice is the piece of mail stamped “This is Not a Bill” that comes after you get medical care.

Watch for three things on your billing statement:

- Charges for something you didn't get
- Billing for the same thing twice
- Services that were not ordered by the doctor

Stop Prescription Drug Scams: Protect Personal Information and Report Complaints

Con artists and fake companies are taking advantage of the new Medicare prescription drug benefit to steal information, money or worse.

How they do it:

- Call and offer to sign you up for a \$299 prescription drug plan (or similar amount).
- Use emails and the internet to offer to help find free or low-cost prescription drug programs for a fee - often asking \$195 or as little as \$5 for each prescription.
- Pretend they are from Medicare, Social Security or the American Medical Association.
- Ask you or your parents to sell your prescription drugs or use your parents' Medicare benefit to buy someone else's drugs.
- Offer bribes to pharmacies, doctors or other health care workers to get them to change your parents' prescription or prescribe drugs they do not need.
- Prescription "shorting" - the pharmacy gives you parents' one or two fewer pills.

Know the facts:

- The Social Security Administration and Medicare do not call or visit.
- No one can come into a home uninvited.
- Medicare Prescription Drug Plans are not allowed to ask for a bank account number, Medicare number, credit card or other personal information over the phone.
- Information on free and low-cost prescription drug programs is available at no charge. Ask a pharmacist, physician, or local senior agency for information or check out websites such as www.pparx.org or www.benefitscheckup.org.

How to avoid these scams:

- Hang up the phone immediately. It is shrewd to be rude!
- Call 911 if you feel threatened.
- Never give any personal information, such as Medicare, Social Security, bank account or credit card numbers to anyone who calls on the phone or comes to the door.
- Sign up for the National Do Not Call Registry at 1-888-382-1222 or www.donotcall.gov.
- Count your pills before you leave the pharmacy or when you receive them in the mail.
- To report complaints, e.g., call your local Senior Medicare Patrol (SMP) at 1-555-555-1212 or
- Call Medicare at 1-800-MEDICARE (1-800-633-4227) with Medicare questions or concerns.

To report anyone attempting to steal money or personal information or selling fake prescription plans, call:

- The local police department
- 1-877-7SAFERX (1-877-772-3379) **OR** 1-800-HHS-TIPS (1-800-447-8477)

Living Will and Durable Power of Attorney for Health Care

Date of Directive: _____

Name of person executing Directive: _____

Address of person executing Directive: _____

A Living Will A Directive to Withhold or to Provide Treatment

1. Being of sound mind, I willfully and voluntarily make known my desire that my life shall not be prolonged artificially under the circumstances set forth below.

This directive shall only be effective if I am unable to communicate my instructions and:

- a. I have an incurable injury, disease, illness or condition and two (2) medical doctors who have examined me have certified:

- (1) That such injury, disease, illness or condition is terminal; and
- (2) That the application of artificial life-sustaining procedures would serve only to prolong artificially my life; and
- (3) That my death is imminent, whether or not artificial life-sustaining procedures are utilized.

OR

- b. I have been diagnosed as being in a persistent vegetative state.

In such event, I direct that the following marked expression of my intent be followed, and that I receive any medical treatment or care that may be required to keep me free of pain or distress.

Check one box and initial the line after such box:

☐

_____ I direct that all medical treatment, care and procedures necessary to restore my health, sustain my life, and to abolish or alleviate pain or distress be provided to me. Nutrition and hydration, whether artificial or nonartificial, shall not be withheld or withdrawn from me if I would likely die primarily from malnutrition or dehydration rather than from my injury, disease, illness or condition.

OR

☐ _____ I direct that all medical treatment, care and procedures, including artificial life-sustaining procedures, be withheld or withdrawn, except that nutrition and hydration, whether artificial or nonartificial shall not be withheld or withdrawn from me if, as a result, I would likely die primarily from malnutrition or dehydration rather than from my injury, disease, illness or condition, as follows: (if none of the following boxes are checked and initialed, then both nutrition and hydration, of any nature, whether artificial or nonartificial, shall be administered.)

Check one box and initial the line after such box:

☐ _____ A. Only hydration of any nature, whether artificial or nonartificial, shall be administered;

☐ _____ B. Only nutrition, of any nature, whether artificial or nonartificial, shall be administered;

☐ _____ C. Both nutrition and hydration, of any nature, whether artificial or nonartificial shall be administered.

OR

☐ _____ I direct that all medical treatment, care and procedures be withheld or withdrawn, including withdrawal of the administration of artificial nutrition and hydration.

2. This Directive shall be the final expression of my legal right to refuse or accept medical and surgical treatment, and I accept the consequences of such refusal or acceptance.
3. If I have been diagnosed as pregnant, this Directive shall have no force during the course of my pregnancy.
4. I understand the full importance of this Directive and am mentally competent to make this Directive. No participant in the making of this directive or in its being carried into effect shall be held responsible in any way for complying with my directions.

A Durable Power of Attorney for Health Care

1. Designation of Health Care Agent

None of the following may be designated as your agent:

- (1) *your treating health care provider;*
- (2) *a nonrelative employee of your treating health care provider;*
- (3) *an operator of a community care facility; or*
- (4) *a nonrelative employee of an operator of a community care facility.*

If the agent or an alternate agent designated in this Directive is my spouse, and our marriage is thereafter dissolved, such designation shall be thereupon revoked.

I do hereby designate and appoint the following individual as my attorney in fact (agent) to make health care decisions for me as authorized in this Directive.

(Insert name, address and telephone number of one individual only as your agent to make health care decisions for you.)

Name of Health Care Agent: _____

Address of Health Care Agent: _____

Telephone Number of Health Care Agent: _____

For the purposes of this Directive, "health care decision" means consent, refusal of consent, or withdrawal of consent to any care, treatment, service or procedure to maintain, diagnose or treat an individual's physical condition.

2. Creation of Durable Power of Attorney for Health Care

By this portion of this directive, I create a durable power of attorney for health care. This power of attorney shall not be affected by my subsequent incapacity. This power shall be effective only when I am unable to communicate rationally.

3. General Statement of Authority Granted

Subject to any limitations in this directive, including as set forth in the paragraph immediately above, I hereby grant to my agent full power and authority to make health care decisions for me to the same extent that I could make such decisions for myself if I had the capacity to do so. In exercising this authority, my agent shall make health care decisions that are consistent with my desires as stated in this Directive or otherwise made known to my agent including, but not limited to, my desires concerning obtaining or refusing or withdrawing life-prolonging care, treatment, services and procedures, including such desires set forth in a living will or similar document executed by me, if any.

(If you want to limit the authority of your agent to make health care decisions for you, you can state the limitations in paragraph 4 ("Statement of Desires, Special Provisions, and Limitations") below. You can indicate your desires by including a statement of your desires in the same paragraph.)

4. Statement of Desires, special Provisions and Limitations

(Your agent must make health care decisions that are consistent with your known desires. You can, but are not required to, state your desires in the space provided below. You should consider whether you want to include a statement of your desires concerning life-prolonging care, treatment, services and procedures. You can also include a statement of your desires concerning other matters relating to your health care, including a list of one or more persons whom you designate to be able to receive medical information about you and/or to be allowed to visit you in a medical institution. You can also make your desires known to your agent by discussing your desires with your agent or by some other means. If there are any

types of treatment that you do not want to be used, you should state them in the space below. If you want to limit in any other way the authority given your agent by this Directive, you should state the limits in the space below. If you do not state any limits, your agent will have broad powers to make health care decisions for you, except to the extent that there are limits provided by law.)

In exercising the authority under this durable power of attorney for health care, my agent shall act consistently with my desires as stated below and is subject to the special provisions and limitations stated in a living will or similar document executed by me, if any. Additional statement of desires, special provisions, and limitations:

(You may attach additional pages or documents if you need more space to complete your statement.)

5. Inspection and Disclosure of Information Relating to My Physical or Mental Health

- a. General Grant of Power and Authority. Subject to any limitations in this directive, my agent has the power and authority to do all of the following:
 - (1) request, review and receive any information, verbal or written, regarding my physical or mental health including, but not limited to, medical and hospital records;
 - (2) execute on my behalf any releases or other documents that may be required in order to obtain this information;
 - (3) consent to the disclosure of this information; and
 - (4) consent to the donation of any of my organs for medical purposes. (If you want to limit the authority of your agent to receive and disclose information relating to your health, you must state the limitations in paragraph 4 (“Statement of Desires, Special Provisions, and Limitations”) above.)

- b. HIPAA Release Authority. My agent shall be treated as I would be with respect to my rights regarding the use and disclosure of my individually identifiable health information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 U.S.C. 1320d and 45 CFR 160 through 164. I authorize any physician, health care professional, dentist, health plan, hospital, clinic, laboratory, pharmacy, or other covered health care provider, any insurance company, and the Medical Information Bureau, Inc. or other health care clearinghouse that has provided treatment or services to me, or that has paid for or is seeking payment from me for such services, to give, disclose and release to my agent, without restriction, all of my individually identifiable health information and medical records regarding any past, present or future medical or mental health condition, including all information relating to the diagnosis of HIV/AIDS, sexually transmitted diseases, mental illness, and drug or alcohol abuse. The authority given my agent shall supersede any other agreement that I may have made with my health care providers to restrict access to or disclosure of my individually identifiable health information. The authority given my agent has no expiration date and shall expire only in the event that I revoke the authority in writing and deliver it to my health care provider.

6. Signing Documents, Waivers and Releases

Where necessary to implement the health care decisions that my agent is authorized by this directive to make, my agent has the power and authority to execute on my behalf all of the following: (a) documents titled, or purporting to be, a “refusal to permit treatment” and/or a “leaving hospital against medical advice”; and (b) any necessary waiver or release from liability required by a hospital or physician.

7. Designation of Alternate Agents

(You are not required to designate any alternate agents but you may do so. Any alternate agent you designate will be able to make the same health care decisions as the agent you designated in paragraph 1 above, in the event that agent is unable or ineligible to act as your agent. If an alternate agent you designate is your spouse, he or she becomes ineligible to act as your agent if your marriage is thereafter dissolved.) If the person designated as my agent in paragraph 1 is not available or becomes ineligible to act as my agent to make a health care decision for me or loses the mental capacity to make health care decisions for me, or if I revoke that person’s appointment or authority to act as my agent to make health care decisions for me, then I designate and appoint the following persons to serve as my agent to make health care decisions for me as authorized in this Directive, such persons to serve in the order listed below:

a. First Alternate Agent:

Name _____

Address _____

Telephone Number _____

b. Second Alternate Agent:

Name _____

Address _____

Telephone Number _____

c. Third Alternate Agent:

Name _____

Address _____

Telephone Number _____

8. Prior Designations Revoked

I revoke any prior durable power of attorney for health care.

DATE AND SIGNATURE OF PRINCIPAL

(You must date and sign this Living Will and Durable Power of Attorney for Health Care.)

I sign my name to this Statutory Form Living Will and Durable Power of Attorney for Health Care on the date set forth at the beginning of this Form at

(Signature)

(City, State)

Area Agencies on Aging

Area I

Pearl Bouchard, Director
1221 Ironwood Drive, Suite 102
Coeur d'Alene, Idaho 83814
Phone: 667-3179 Fax: 667-5938
1-800/786-5536

Area II

Jenny Zorens, Director
SW Idaho Area Agency on Aging
124 New 6th Street
Lewiston, Idaho 83501
Phone: 743-5580 Fax: 746-7923
1-800/877-3206

Area III

Lori Brelia, Director
SW Idaho Area Agency on Aging
125 E. 50th Street
Garden City, ID 83714
Phone: 322-7033 Fax: 322-3569
Information and Assistance Phone Numbers:
Phone: 549-2411
1-800/859-0324

Area IV

Jim Fields, Director
College of Southern Idaho
P.O. Box 1238 (998 N. Washington)
Twin Falls, Idaho 83303-1238
Phone: 736-2122 Fax: 736-2126
1-800-574-8656

Area V

Sister Anthony Marie Greving, Director
S.E. Idaho Council of Governments
P. O. Box 6079 (214 E. Center Street)
Pocatello, Idaho 83205-6079
Phone: 233-4032 Fax: 233-4841
1-800/526-8129

Area VI

Cherry Aschenbrenner, Director
P.O. Box 51098 (357 Constitution Way)
Idaho Falls, Idaho 83405
Phone: 522-5391 Fax: 522-5453
1-800/632-4813

Call the number nearest to your home from the above list for information on any of the following services:

**Legal Aid Services
Meals/Food
Nutrition**

**Community Based Services
In-Home Services**

Claimant's Kit Letters

Letter to Social Security and Railroad Retirement:

Gentlemen:

Please send me any instructions or forms that I may need to complete my application for the Social Security benefits to which I am entitled upon the death of my _____.

_____, (relationship)
_____, who died on
(full name) (S.S.#)
_____,
(day, month) (year).

Sincerely,

(signature)

(print full name)

(address)

(area code/home number)

Letter to Veterans Administration

This is to inform you of the death of my _____,
(relationship)
_____, _____ who died on
(full name) (service number)
_____, _____. From _____ to
(day, month) (year)
_____ he/she served in the U.S. _____
(branch)

The Government life insurance policy number is _____.

Please let me know if you need any other documents or information.

Sincerely,

(signature)

(print full name)

(address)

(area code/home number)

Letter to Insurance Companies

Gentlemen:

I am designated as beneficiary of policy number(s)

_____ on the life of my _____,
(relationship)
_____ who died on _____, _____.
(full name) (day, month) year

Please send me the necessary information and forms for claiming the proceeds to which I am entitled.

Also, please check your files for any other policies the deceased may have owned with your company.

Sincerely,

(signature)

(print full name)

(address)

(area code/home number)

Letter to Employer

Gentlemen:

This is to inform you that my _____,
(relationship)

_____ died on _____, _____.
(full name) (day, month) (year)

Please send me any information relating to employee benefits to which I might be entitled as beneficiary.

Please let me know what documents and information you will need me to provide in settling any claims.

Sincerely,

(signature)

(print full name)

(address)

(area code/home number)

PUBLICATIONS ORDER FORM

PLEASE PRINT YOUR NAME, ADDRESS AND TELEPHONE NUMBER.

Name _____

Street Address _____

City _____ State _____ Zip _____

Phone number *(in case we have a question about your order)* _____

PLEASE SEND ME ONE EACH OF THE FOLLOWING PUBLICATIONS:

- ☐ A Shopper's Guide to Long-Term Care Insurance (NAIC)
- ☐ Can I Get Help with Nursing Home Costs? (HW)
- ☐ Pay it Right! Protecting Medicare from Fraud (CMS)
- ☐ Choosing a Medigap Policy (CMS)
- ☐ Idaho Shopper's Guide to Medicare Supplement Insurance (SHIBA)
- ☐ Home Health/Medicare (CMS)
- ☐ Hospice Benefits/Medicare (CMS)
- ☐ Medicare Coverage Kidney Dialysis & Kidney Transplant (CMS)
- ☐ Guide to Choosing a Nursing Home (CMS)

- ☐ Please send information on becoming a SHIBA volunteer.
- ☐ I'm interested in having a speaker for my group. Please call me.
 - Name of group _____
 - Size of group (audience) _____
 - Phone number _____

SEND THIS FORM TO:

**SHIBA/Idaho Department of Insurance
700 West State Street, 3rd Floor
P. O. Box 83720
Boise, ID 83720-0043**

FOLD AND MAIL OR PLACE IN ENVELOPE USING ADDRESS ABOVE

Postage
Required

SHIBA
Senior Health Insurance Benefits Advisors
Idaho Department of Insurance
700 West State Street, 3rd Floor
P. O. Box 83720
Boise, ID 83720-0043

SHIBA

SENIOR HEALTH INSURANCE BENEFITS ADVISORS

Genii Hamilton

Insurance Advisory Specialist
(208) 334-4352

*Counselors Available
Statewide*

SHIBA REGION 1

Jason Hobson
Idaho Department of Insurance
2005 Ironwood Parkway, Suite 143
Coeur d'Alene, ID 83814
jason.hobson@doi.idaho.gov

SHIBA REGION 2

Karen Clark
Idaho Dept. of Insurance
700 W. State Street
Boise, ID 83720
karen.clark@doi.idaho.gov

Tonya Steele
Idaho Dept. of Insurance
700 W. State Street
Boise, ID 83720
tonya.steele@doi.idaho.gov

SHIBA REGION 3

Tammy Stricker
Idaho Dept. of Insurance
1445 Filmore, Suite 1104
Twin Falls, ID 83301
tamara.stricker@doi.idaho.gov

SHIBA REGION 4

Susan Stricker
Idaho Dept. of Insurance
353 N. 4th, Suite 200
Pocatello, ID 83201
susan.stricker@doi.idaho.gov

Call Statewide: 1-800-247-4422